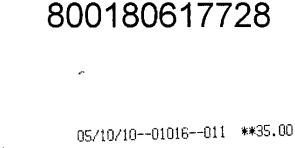
F08000002581

(Requestor's Name)						
(Address)						
(Ad	dress)					
(Cit	y/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Nar	me)				
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						





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CA. Charge

MAY 1 3 2010

EXAMINER

COVER LETTER

TO: Amendment Section of Corpo	on rations	these				
		•	•			
SUBJECT: INFINITY AIR, INC.						
Name of Corporation						
DOCUMENT NUMBER	:F08	000002581				
The enclosed Statement of	Change of Registered Offic	ce/Agent and fee are subn	nitted for filing.			
Please return all correspon	dence concerning this matte	er to the following:				
	DJOM	EH, ALI				
		ontact Person				
INFINITY AIR, INC.						
	Firm/C	Company				
•	8100 NW	21 STREET				
		dress				
		•	., .			
	DORAL	FL 33122				
	City/State a	and Zip Code				
	alid@infin	ityair.com	·			
E-mai	l address: (to be used for	future annual report no	tification)			
For further information co	ncerning this matter, please	call:				
· Allf	DJOMEH		<i>4</i> 70-0187			
	ontact Person	at (305) Area Code & Day	470-0187 rtime Telephone Number			
		•				
Enclosed is a \$35,00 check	k made payable to the Depa	rtment of State.				
Ā D P.	mendment Section division of Corporations O. Box 6327 allahassee, FL 32314	Street Address Amendment Division of Clifton Build 2661 Execut Tallahassee,	Section Corporations ling. ive Center Circle			

CR2E045 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a co	orporation organized	507.1508, or 617.1508, Fla I under the laws of the Sta	ute of California
			l agent, or both, in the Sta	te of Florida.
	he corporation: INFIN			
2. The principal	office address: 18321	Ventura Blvd Su	uite #400 Los Angele	s, CA 91356
3. The mailing a	ddress (if different): 81	00 NW 21 Stree	t, Doral FL 33122	
4. Date of incorp	poration/qualification:	04/10/1997	Document number:	F08000002581
5. The name and Florida Depart	street address of the cur tment of State: (If resign	тепt registered agen ed, enter resigned)	t and registered office on	file with the
•		DJOMEH, ALI		
	150	1 NW 82 Avenue	е	
	DC	RAL, FL 33126		SEC S
6. The name and (if changed):	street address of the nev	v registered agent (i	f changed) and /or register	10 MAY 10 PM 3: 19 SECRETARY OF STATE O
	8100	0 NW 21 Street		
	DOF	RAL, FL 33122		
		P.O. Box NOT acc	eptable	
The street addre	ss of its registered offic be idemical.	e and the street add	dress of the business offic	e of its registered agent,
Such change wa authorized by th	s authorized by resolute board, or the corpora	ion duly adopted by tion has been notifi	its board of directors or ed in writing of the chang	by an officer so
Signatur	of an officer or director		Sherie Jan	$\frac{1}{20}$ $\frac{1}{20}$ $\frac{1}{20}$
Thereby accept	the appointment as reg	istered agent and a isions of all statutes d accept the obliga or a change in the re g of this change.		nd complete performance zistered agent. Or, if this I hereby confirm that the
A			3/5/2	>10
	ature of Registered Agent	/ / `	/ / Date	
	nalf of an entity: Infi	hity-Mie Ir	u _c .	
	ped or Printed Name			

* * * FILING FEE: \$35.00 * * *